

Grafton Hall Resident Parking Application Form 2010

Email this form to: office@griftonhall.co.nz, or post to Grafton Hall, 40 Seafield View Rd,
Grafton. Auckland 1023.

Resident Details

Name

Room Number (if known)

Mobile Phone Number

Email

Vehicle Details

Make

Model

Colour

License Plate

Car Park Requested for

Semester 1

Semester 2

Full Year

Reason for needing a car in Auckland

Office Use Only:

Received _____

Car Park No _____